DOCUMENT RESUME

ED 438 647 EC 307 669

AUTHOR	McDowell, Alison; Askvig, Brent A.
TITLE	Efficacy of Some Behavior Management Strategies for Students with Serious Emotional Disturbances.
INSTITUTION	Minot State Univ., ND.
SPONS AGENCY	Special Education Programs (ED/OSERS), Washington, DC.
PUB DATE	1998-00-00
NOTE	29p.
CONTRACT	H029A70144
PUB TYPE	Information Analyses (070) -- Opinion Papers (120)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	*Behavior Change; Behavior Disorders; Behavior Modification; *Classroom Techniques; *Cognitive Restructuring; Elementary Secondary Education; *Emotional Disturbances; Intervention; Parent Education; Reinforcement; Self Evaluation (Individuals); Timeout
IDENTIFIERS	*Differential Reinforcement

ABSTRACT

This paper reviews the literature on several popular behavior change strategies that have been implemented in classrooms or other educational settings with students with severe emotional disturbances. Each strategy is first described and then data on its effectiveness are reviewed. The strategies reviewed are: (1) timeout; (2) self-evaluation; (3) choice making strategies; (4) cognitive behavioral strategies (attribution retraining, conflict resolution training, problem solving training, communication-based curriculum, reality therapy); (5) differential reinforcement techniques (of low rate behaviors, other behaviors, appropriate behaviors, and incompatible behaviors); and (6) parent training. Recommendations to teachers concerning classroom use of the various strategies are offered. (Contains 27 references.) (DB)

Reproductions supplied by EDRS are the best that can be made
from the original document.

EC

ED 438 647

Efficacy of Some Behavior Management Strategies for Students with Serious Emotional Disturbances

Alison McDowell, M.S.

and

Brent A. Askvig, Ph.D.

Minot State University
Minot, ND

Running head: Behavior management strategies for SED

Development of this paper was supported in part by funds from the Office of Special Education Programs, U.S. Department of Education (Grant # H029A70144) awarded to Minot State University. The content and opinions expressed herein do not necessarily reflect the position or policy of the granting agency and no official endorsement should be inferred.

BEST COPY AVAILABLE

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☑ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

EC 307669

Abstract

This paper reviews the literature on several popular behavior change strategies for use with students with serious emotional disorders. The particular strategies reviewed here are those that have been implemented in classrooms or other educational settings with these students. Each strategy is described and then the effectiveness is shown through various studies and their data. The authors then discuss the potential uses of these strategies by teachers in educational settings.

Children with serious emotional disturbances (SED) present some of the most difficult challenges to parents, teachers, and administrators. They often bring about negative feelings and negative behaviors in others (Kaufman, 1993). These students exhibit many behavioral outbursts that not only disrupt their education, but the learning of their peers as well. Unfortunately, these behavioral problems often escalate to the point at which they are placed in restrictive settings away from children without disabilities. These settings are usually resource intensive and expensive (Kaufman, 1993). When educational and other support systems can help children with SED manage their behaviors effectively, everyone wins.

Classroom Problems

SED is defined as "...a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance" (45 C.F.R. 121a.5). The characteristics include problems learning "which cannot be explained by intellectual, sensory, or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate types of behavior or feelings under normal circumstances; a general, pervasive mood of unhappiness or depressions; or a tendency to develop physical symptoms or fears associated with personal or school problems" (45 C.F.R. 121a.5).

Anyone who has encountered a child labeled SED understands the significance of the disability on the ability to learn. These children may be aggressive toward the teacher and other students, may withdraw from social contact, destroy personal property, or harm themselves or others (Kaufman, 1993). Obviously, controlling these behaviors is critical to

establishing a good learning environment. In fact teachers cite noncompliance as a critical barrier to successful inclusion of students with disabilities into regular educational settings (Walker, 1990).

Teacher Responses to Problems

Teachers respond to student behavior problems in a variety of ways. Ludwig (1994) found that both special education and regular education teachers can offer reasonable suggestions for dealing with noncompliant classroom behaviors. There was no difference in the two groups' abilities to identify reasonable suggestions for students with mild or moderate behavioral problems. However, when the behaviors were more significant (e.g., harming others, property destruction), special education teachers were more likely to develop strategies that matched the literature on validated methodologies.

Most often, teachers attempt to use classroom management strategies to handle the problems. Alderman and Nix (1997) found that teachers most often choose interventions that increase appropriate behaviors to deal with classroom behavior problems. They did this whether or not they had an explanation of the behavior. However, knowledge of the reason for the behavior helped the teachers understand the situation better.

Similarly, teachers with more experience tend to choose more positive interventions (Alderman & Nix, 1997). Teachers with less experience often chose strategies that were less time consuming and showed more immediate results. Unfortunately, these strategies typically did not yield long lasting results. If teachers can determine what is or is not effective in managing student behavior, student learning will likely

increase. Thus, it is important that teachers review the literature on various classes of behavior strategies and then systematically use applicable interventions in the schools.

Review of Strategies

Several authors have outlined categories or classes of behavior management strategies for students with disabilities. Ludwig (1994) suggested that there are five distinct categories of interventions for classroom noncompliance (stimulus reinforcement, response development, extinction, prompting, and punishment) and a sixth category in which two or more of the interventions were combined. Popovich (1981) identifies seven areas of procedures to eliminate inappropriate behaviors. These areas include reinforcement, satiation, negative practice, extinction, physical restraint, timeout, and overcorrection. Finally Bernstein, Ziarnik, Rudrud, and Czajkowski (1981) put interventions in three classes, strategies that increase behaviors, those that teach new behaviors, and those that decrease behaviors.

While categorizations may be helpful, they certainly are not clearly defined or completely agreed upon. In this paper, we review several behavioral strategies that have been used with students identified as SED. We have identified strategies in six categories; timeout, self-evaluation, choice making strategies, cognitive behavioral strategies, differential reinforcement techniques, and parent training. While, the reader may or may not agree with our categories we feel they help guide the teacher in choosing effective options.

This review is not meant to be exhaustive, but rather provide examples of the typical literature available on the effectiveness of the

methods. The reader is encouraged to read the articles and further explore the literature in a particular area of interest.

Timeout

Timeout is the removal of a student from a reinforcing situation following the occurrence of a misbehavior. It is one of the most commonly used behavioral interventions in special education (Wood & Wrobel, 1990). However, it is often the most aversive and most incorrectly used intervention. Stage (1997) studied the intervention phases of timeout and the effectiveness of each with 36 students with behavioral disorders. The phases included students serving a 15 minute timeout, students serving a timeout with an academic assignment to complete during timeout; and timeout with a problem solving task pertaining to the reason for the timeout. Students were sent to timeout if they displayed one of the following four types of behaviors: disruptive behaviors in the classroom, verbal abuse, leaving the classroom without permission, or physical aggression.

There were no apparent effects towards the disruptive behavior regardless of the behavior or the type of timeout. Frequency of disruptive behaviors remained consistent, which indicated that timeout had little effect or generalization to classroom behaviors. One possible explanation of the failure of timeout is that teachers used a negative, disapproving method (e.g., verbal disapproval, cahstizing the student) to decrease behaviors. Thus, it is likely that if a student behaved in a way the teacher disapproved of, and the teacher used a negative methods, timeout became an escape (and possibly a reinforcer) for the student (Stage, 1997).

Wood and Wrobel (1990) asked 66 students, ages 13 to 20, their opinion of timeout and the usefulness of such an intervention. Students strongly agreed that when other students are displaying severely disruptive and aggressive behaviors in the classroom, timeout is needed. However, the students felt that timeout was not justified or useful in handling their own behavior problems. In general the students' responses suggest that timeout may serve to reduce the tension in a classroom, but it likely has little effect on the specific student behavior.

Costenbaer and Reading-Brown (1995) investigated the amount of time taken by using timeout as a behavioral control intervention with 156 students with emotional disorders in a six-county area. Over the course of the school year, an extraordinary number of hours were spent in timeout. For many students, time spent in timeout totaled 165 hours or more. This was equivalent to missing approximately 21 days of school. The amount of timeout used in the school year also shows timeout as a failed intervention in teaching more appropriate classroom behaviors.

Self-evaluation

Self evaluation is a technique in which the student measures how s/he is doing on a specific task or behavior. This is often paired with a reward system to either increase or maintain appropriate behaviors. In some cases, the student must match his/her evaluation of behavior to the teacher evaluation. In these instances, the child only earns a reinforcer when s/he closely matches the teacher's evaluation.

Kern, Wacker, Mace, Falk, Dunlap, and Kromrey (1995) examined the impact of rewards and feedback sessions on student displays of impulsivity, excessive resistance, poor anger control and verbal

aggression. This experiment was first delivered on a single subject design across students, then in a group design. All of the students had emotional or behavioral disorders, poor peer interactions, aggression, fighting, and tantrums.

During the single subject phase of the study three students were rewarded (given pencils, balloons, etc.) for decreasing inappropriate behaviors during class. They were then involved in a fifteen minute feedback discussion. During the discussion they reviewed a video tape of the previous day. When inappropriate behaviors decreased, they were rewarded. Lastly, the students participated in a fifteen minute self-evaluation session while watching the tape. Each student was awarded points for each self evaluation correctly made. Positive results were observed only in the phase which used videotaping, self-evaluations and earned rewards. Not only did the inappropriate behaviors decrease, but there was also an increase in appropriate interactions between students.

The group portion of the study included video taping, self-evaluations and earned rewards. The 27 students were from three different classrooms. The group results showed decreases in inappropriate peer interactions, even after a fading period. Appropriate interactions either remained the same as baseline or showed a slight increasing trend (Kern, et al., 1995).

Two 11 year old boys with problems in rule following, on task behaviors, and poor teacher interactions were the focus of a case study (DuPaul, McGoey, & Yugar, 1997). With the use of token reinforcement, teacher mediated self evaluation, and peer mediated self evaluation in a mainstreamed classroom, the students' problem behaviors decreased .

Also, they increased their appropriate classroom behaviors, showed improved teacher ratings on their behavior, and evidenced stable social skills and self worth ratings.

Rhode, Morgan and Young (1983) used token reinforcement with verbal feedback and self evaluation with teacher matching to increase on task, rule following, and correct work behaviors in six elementary aged students with SED. The improved behaviors generalized to the regular education class and maintained over time.

Finally, eight high school males with labels of behavior disorders and/or SED were observed in a multiple baseline across settings design (Smith, Nelson, Young, & West, 1992). The researchers used self evaluation with matching a nondisabled peer and goal setting strategies to increase off task, correctness of work, and completeness of work behaviors. While the strategies were effective alone and together, the results did not generalize nor were they maintained after intervention ceased.

Choice Making Strategies

In some cases, aggressive behavior can be the result of student perceptions of helplessness. They may feel as if others direct their every movement. They feel as if they have few choices. In an effort to combat these perceptions, researchers have examined the use of student choices to manage student behavior. This is done by offering choices, some preferred and some not preferred, to students. They are then reinforced for exhibiting appropriate behaviors.

Dunlap, DePerczel, Clarke, Wilson, Wright, White and Gomez (1994) investigated the effects of choice-making on the responding of

elementary school children with emotional and behavioral disorders. A two phase, ABAB single subject study was used to examine disruptive, aggressive behaviors. In the first phase, students were given academic menus containing tasks necessary to meet English and spelling class objectives. The tasks were appropriate to each student's learning level. Students then chose which tasks to complete and the order in which they were completed.

In the second phase, one youngster with severe behavioral disorders was not given a choice of subjects or tasks, but rather was given a choice of materials. During each reading lesson, he chose the particular reading book from which to read. In both phases of the study, all students showed reductions in disruptive, aggressive classroom behaviors when allowed choices.

Harding, Wacker, Cooper, Millard, and Jensen-Kovalan (1994) found similar results after studying the disruptive behaviors of seven children with emotional disorders in different situations. These included free play, general task instructions and discussion, task specific instructions, choice of two tasks, differential reinforcement of alternative behavior, differential reinforcement of communication, preferred activity choice, and timeout with guided compliance. All children demonstrated 100% appropriate behavior during free play. For several children, the lowest level of appropriate behavior was displayed during general and task specific instructions. Most students showed overall high rates of appropriate behavior during choice-making and preferred activity situations. These results suggest that choice plays a large role in exhibition of appropriate behavior.

Cognitive Behavioral Strategies

This category includes techniques that teach students to think about what they are doing or could do in problem situations. In essence they are taught to think first and then change their behavior to match the thoughts. Students are often taught in group situations in sessions led by a teacher, psychologist, or a counselor. A variety of terms are used to describe the techniques or curriculum used. Several strategies are described below.

Attribution retraining. The theory of attribution states that the child's perception of what has occurred in a given situation initiates the sequence of events that then happen (Waas, 1988). For example, a student with aggressive tendencies may be bumped in a school lunch line and instead of seeing it as a naturally occurring accident, he sees it as an intentional bump. He then feels anger towards the other student, and an aggressive response often occurs (Waas, 1988).

Attributional changes in verbally and physically aggressive male students were the center of the study by Hudley (1994). The goal was to determine if the identified attributional biases of highly aggressive male youth could be retrained, therefore decreasing the aggressive verbal and physical behaviors. Twenty-four aggressive and twelve nonaggressive African American male students were chosen by teacher and peer nominations from seventeen classrooms. The aggressive students displayed behaviors such as starting fights, disrupting class, and losing their temper. The students were taught how to detect aggression and to see the link between cognition and predicted behavior. The first component of the retraining consisted of vignettes made by the students

showing their understanding of the difference between situations having a hostile, an accidental, a prosocial and an ambiguous intent.

The second component was designed to increase the cognitive availability to attributions to uncontrollable causes during an ambiguous scenario. Students watched a video displaying a confrontational situation, then brainstormed what could have been the actual cause. The third component generated behavioral decisions for the student before the situation occurred, thus giving the students a set of behaviors to follow during an ambiguous situation (Hudley, 1994). The attributional change program showed a decrease in verbal aggression in ambiguous situations.

Conflict Resolution Training. Conflict resolution training is an intervention that consists of reviewing and discussing conflicts and the resolution process, and then role playing to practice appropriate skills. In some cases, students study art and literature in the area of conflict. Students learn about what causes a conflict, early signs of a developing conflict, and then how to most appropriately deal with a conflict once it arises.

Cassell (1993) used a treatment package to reduce verbal aggression in 83 students by up to 15%. The conflict resolution training consisted of 24 half hour sessions using discussions of conflicts, role playing, and studying art and literature in the area of conflict. Opportunities were given for the students to make connections between the resolution concepts and the real situations. Not only did the aggressive vebalizations decrease, the results were produced in a short time period after instruction (approximately one month).

Problem solving training. This type of instruction uses group sessions to teach individuals the five steps of problem solving. These

steps are (a) review a conflict, (b) brainstorm possible solutions, (c) choose the best solution, (d) try that solution, and (e) evaluate the effectiveness of the chosen solution. Problem solving is taught in group situations, but is an individualized skill each student learns and adapts for him/herself.

Hughes, Grossman and Hart (1993) studied the effectiveness of problem solving training in decreasing aggressive verbalizations in elementary school students. Students in this study were nominated by teachers due to their disruptive aggressive behaviors in the classroom.

Treatment in one group of students consisted of twenty 45 minute sessions twice a week with three to five students in problem solving skills over a ten week period. The other group of students did not attend sessions. Instead the classroom teachers were individually trained in teacher directed interventions to conflict situations for four 30 minute sessions a over a period of six weeks. The students in the problem solving group showed a decrease in aggressive behaviors, while the students in the teacher directed intervention group showed no significant change.

Classroom observations, teacher and parent ratings were used for follow-up information. Although there was a marked difference between groups shortly after treatment, no difference in aggressive behaviors between groups were evident one year later (Hughes, et al., 1993).

Communication-based curriculum. This technique uses a curriculum in which students are taught how to discuss or defend their views in nonviolent and nonconfrontational manners. These curricula usually incorporate conflict management concepts and training strategies.

Rancer and Kosberg (1994) used mock situations to train students to argue constructively. The training focused on various situations using a four step process. Students were taught to ask four questions; What is the problem? Who is to blame? What are the solutions? and What will the consequences be? Students were also shown how to examine several sub-issues of problems including identifying the signs of the problem, identifying possible solutions, and forseeing outcomes from accepting these solutions. All participants reported a gain in knowledge of how skilled constructive arguing enhanced their communication skills (Rancer & Kosberg, 1994). They learned to use a system to generate more and better quality arguments for their positions. They also saw how the application of the skills influenced their daily lives.

Reality Therapy. This method helps individuals take better control of their lives by systematically teaching them how to clearly identify their own wants and needs. They then evaluate each to see whether or not they can realistically attain these needs. Reality therapy also teaches the individual how to examine and evaluate their own behaviors, which is followed by positive planning. Reality therapy is a technique that uses a series of cognitive therapy steps to change student behavior. While it is more of a counseling approach than a specific set of teaching strategies, many teachers and professionals who work with students with SED rely on it as a means to manage potentially explosive situations.

Marandola and Imber (1979) examined the use of reality therapy in the school classroom. After implementing a series of classroom reality therapy meetings with boys with emotional and behavioral disorders, a significant reduction was demonstrated in student arguments. The classroom meetings consisted of open-ended and problem-solving

discussions with the students. The main focus was on the frequency and intensity of the physical and verbal classroom arguments.

The intervention period consisted of daily meetings for eight days. Topics varied, but the main focus remained on developing a solution to the aggressive behaviors in the classroom. During intervention there was a marked reduction of negative interactions compared to baseline data, from 53 during baseline to two during intervention. Also, physical confrontations were reduced by 67% during intervention. Appropriate behaviors were maintained while inappropriate, aggressive behaviors were sharply decreased (Marandola & Imber, 1979).

Coats (1992) studied the impact of reality therapy with thirty-three students with emotional and behavioral disorders. Staff were given 20 hours of training throughout the school year and treatment was carried out in the classroom. The teachers were trained in creating a more positive, safe environment by using the following points of reality therapy. First, they were taught to stay involved and to give messages that they care. Second, they were not to accept the excuse that someone else caused the student to behave in a particular way. Thus, students were expected to take responsibility for their actions. Third, no punishment was used. Students were taught to see the reality of their behavior, to make clearer choices, and to accept the natural and logical consequences of their behavior. Finally, the teachers and the students accepted the attitude that they were to never give up and to believe that things can get better and people can do better.

Once trained, the teachers implemented reality therapy in the classrooms. When a behavioral situation began, they first asked the student what they wanted. This helped the student identify the direction

of the situation. Second, the student was told to focus on the present behavior, including what they were doing, thinking, and feeling. The teacher then pointed out that the student was choosing his behaviors at that moment. The student next was told to evaluate his present behavior and whether or not it was helping him reach his goal. Fourth, the student was assisted to develop a plan that might work best to reach the initial goal. Finally, the teacher obtained a commitment from the student to use this plan and work harder. Through the commitment plan, a student was to show himself, his peers and teacher that he is a responsible person.

The majority (92%) of the teachers reported using reality therapy methods in every class. They found a marked difference in behaviors including a decline from 79 inappropriate displays of aggression to 28 over the school year. A significant decrease was also found in the number of severe or violent behavioral episodes. Referrals to the support room did not decline, but the number of out of school suspensions was minimal. Most teachers (82%) reported strong effects while the remainder (18%) believed that reality therapy had only moderate effects (Coats, 1993).

Differential Reinforcement Techniques

A number of strategies are available to reduce inappropriate behaviors by positively reinforcing appropriate behaviors. These strategies include the use of differential reinforcement of low rate behaviors (DRL), differential reinforcement of other behaviors (DRO), differential reinforcement of appropriate behaviors (DRA), and differential reinforcement of incompatible behaviors (DRI) (Polloway & Patton, 1993).

DRL. DRL is based on reinforcing the reduction of behavioral occurrences, such as talking out of turn over a specified intervention time period. The student is reinforced after each specific interval of time in which the target behavior decreases (Polloway & Patton, 1993). The DRL can be used in full session or interval schedules. Full session DRL compares the total number of responses in an entire session with a criterion. A reinforcer is given if that number is below that criterion. Interval DRL involves dividing the session into smaller increments of time and reinforcing after each increment in which the number of behaviors is less than the criterion required (Alberto & Troutman, 1995).

DRO. Whereas DRL reinforces the gradual decrease of a target behavior, DRO reinforces only zero occurrences of a target behavior (Alberto & Troutman, 1995). DRO procedures call for reinforcement based on either the omission of a target behavior, or the occurrence of other behaviors. Positive reinforcement is given when a student does not display the behaviors during a given interval of time. This interval is then increased over the intervention period (Polloway & Patton, 1993). DRO can be used in three variations; full session, intervals, or with permanent-product data (e.g., the teacher may place a sticker on every paper that does not contain doodles) (Alberto & Troutman, 1995).

James (1990) used DRO with group contingencies and a message cube in a single subject study to reduce disruptive calling out behaviors in a fifth grade boy with emotional disorders. Student names were written on the classroom chalkboard and remained there as long as they displayed appropriate classroom behaviors. If they exhibited two misbehaviors, the name was erased. Those whose names remained on the board at the

end of the day picked a message card with reward statements such as "no homework" .

Each student also had a message cube, with statements such as help, finished working, and bathroom on it. The student displayed the appropriate side of the cube as necessary during the class session, thus reducing the need for verbal comments to the teacher. The intervention produced an immediate decrease in the student's calling out behavior for approximately one week. However, continued use caused student frustration and further intervention methods (e.g., classroom meetings, role playing and self-recording) were needed to reduce the behavior to adequate classroom levels.

It is important to keep in mind that when using DRO, reinforcement is delivered if the student does not display the target behavior. In effect, the student may be positively reinforced for performing a wide range of inappropriate behaviors as long as he does not display the target behavior (Alberto & Troutman, 1995).

It is also important to remember that DRO reinforces the omission of the target behavior. If a student does not have a large repertoire of appropriate behaviors, he may not have more appropriate behaviors to replace the target behavior (Alberto & Troutman, 1995). The teacher should identify the inappropriate behavior while teaching a new, more appropriate behavior to reduce the possibility of frustrating the student .

DRI/DRA. One way to reduce the possibility of frustration in students during an intervention period is to use DRI or DRA strategies (Alberto & Troutman, 1995). These strategies strengthen behaviors that are incompatible with or that represent the appropriate behavior. For example, in order to decrease off task behaviors, a student is positively

reinforced when s/he stays on task and completes the necessary class work. One must be careful with DRI to select a behavior that requires action to prevent the student from being reinforced for "just sitting there" (Polloway & Patton, 1993).

Harding et al. (1994) used DRA to reduce the disruptive behaviors of seven children with emotional disorders in various situations. Using free play, tasks with general directions, tasks with specific instructions, choices, and DRA, the inappropriate student behaviors decreased while appropriate behaviors increased. It is unclear whether the responses were directly related to DRA or to the combination and sequence of interventions used in the package.

When using DRI or DRA, it is important to select an incompatible or appropriate behavior the student already has in her/his repertoire. If the student already displays the appropriate behavior, s/he is not expected to decrease inappropriate behaviors while compounding that with learning a new behavior (Alberto & Troutman, 1995).

Parent Training

Parent training strategies are used to produce a change in family behavior that then can influence student behavior. Some parent training strategies focus on teaching specific parenting skills while other strategies emphasize general family counseling. Serna, Schumaker, Sherman and Sheldon (1991) examined the effects of a three phase family communication program in teaching parent-youth interactions. Skills were taught in a clinical setting then practiced in the home setting. Family conference skills were also taught, then used to resolve a variety of problems specific to each family.

The researchers found that teaching social communication skills resulted in a substantial increase of skills in the teaching setting. These teachings were also associated with some generalization in the use of these skills at home in directed interactions. However, little generalization was reported in nondirected interactions. Review and practice had little effect in the home, but the use of family conferences produced high levels of generalization in interactions. Also the skill-teaching phase and family conference phase were both associated with marked improvements in the ratings of family members of their communication and interactions. Also, there were no data on direct impact on child behavior. While the perception was that the behavior improved, there was no validation of child change.

Serketich and Dumas (1996) conducted a review of 26 behavior parent training programs and found that nearly 80% of the children were reported to be better adjusted after their parents participated in the treatments. Again, most of the improvements were determined through parent reports, not direct observation of student behavior.

The most important area for future study is whether the family conference procedures can enhance the generalization of previously taught skills to naturally occurring parent-youth interactions, and if so what part of the procedure can do so. Researchers will also need to examine exactly how many and what kind of opportunities would be useful to use, what type of parent-youth interactions typically occur, and to what extent the various types of skills are used. Finally, research must be conducted on the impact on child behavior change.

Recommendations for Teachers

When teachers face potentially explosive situations and students in their classrooms, they need to quickly use appropriate techniques to handle the problems. In the long term, the best approach is to avoid these situations through effective teaching. This paper examined several categories of behavioral interventions for students with serious emotional disturbances. Recommendations on these strategies are given below.

Timeout. While it is one of the most frequently used techniques, timeout has the drawback of having little longterm effect (Stage, 1997). Students report that while timeout (for someone else) helps reduce the stress and tension in the classroom, it has little impact on changing their own behavior (Wood & Wrobel, 1990). In some cases, students intentionally act out to be placed in timeout. Obviously, they do not think of removal from the classroom as punishing, thereby defeating the purpose of timeout (removal from a reinforcing situation). Additionally, timeout is considered aversive and is not allowed by some school districts and professionals. We suggest that timeout be seen as a crisis management tool, in which possibly dangerous situations are reduced and other students and staff are protected. Teachers then must determine if, in fact, removal from the classroom is removal from reinforcement to truly meet the definition of timeout.

Self evaluation. There is much literature on the use of self evaluation in the management of child behavior. The studies reviewed here support the general professional agreement that self evaluation is effective in dealing with problem behavior in the classroom. Like some of the cognitive behavioral strategies, self evaluation forces the child to examine his/her thought and action patterns. And, like differential

reinforcement systems, the child receives rewards when appropriate behavior is exhibited. However, students must be taught how to effectively use self evaluation.

Teachers are encouraged to begin using self evaluation by having the student match his/her evaluations to the teacher evaluations (c.f., DuPaul, et al., 1997, and Rhode, et al., 1983). This has two benefits. First, the student quickly learns the appropriate standard for behavior (assuming the teacher is consistent in her evaluations). Secondly, the teacher can monitor and time the reinforcers in the classroom. This allows a bit more control of the situation. Later, as the student becomes proficient in self evaluation and understands the appropriate times for reinforcement, s/he can take over the intervention and become more independent.

Choice-making. Disruptive, aggressive behaviors decreased when students are allowed some control over the learning materials or the instructional situation (Dunlap, et al., 1994; Harding et al., 1994). However, teachers need to plan for these situations in the classroom. Menus of possible activities (Dunlap, et al., 1994) help in this area. Teachers must assure that the choices are reasonable activities for the class, and the students must be able to complete the tasks. Finally, teachers must be willing to allow some student-directedness in the classroom. Some teachers may find this difficult to do.

Cognitive behavioral therapy. These techniques show promise in changing student thinking and behavioral patterns. Many teachers like cognitive behavioral therapy because the students develop clear patterns of how to approach problem situations. At least three of the techniques reviewed, communication based curriculum, attributional training, and

conflict resolution training appear to be effective for students with SED. These methods have taught students to use constructive arguing skills (Rancer & Kosberg, 1994), decrease verbal aggression in non-threatening (yet ambiguous) situations (Waas, 1988), and reduce aggressive verbalizations in the classroom (Cassell, 1993).

On the other hand, some cognitive behavioral therapy techniques may not be effective for students with SED. Problem solving training seems to produce some short term positive effects. However, the long term outlook is not satisfactory, particularly if instruction in the technique is not continued (Hughes, et al., 1993). Also, reality therapy can result in a decrease in the number of severe or violent behavioral episodes. However, the real test is whether the students' behaviors change over the long term (Sanderson, 1997). In Coats' (1993) study the referrals to the support room did not decline. Also, teachers had a tendency to say reality therapy was effective, when student behavior did not markedly change or maintain. Thus, teachers are cautioned in using the approach.

Teachers need to plan for the use of cognitive behavioral strategies by utilizing the many curricula available and by taking the time to teach the strategies to the students. The strategies are not useful for immediate, dangerous situations. However, the effects are likely to be more long term when the students are proficient and have been taught the relevant steps.

Differential reinforcement. Differential reinforcement strategies can be effective, positive behavior management strategies in classrooms. However, a significant amount of pre-intervention planning must occur (Alberto & Troutman, 1995). Teachers must clearly identify the target behavior(s) and consistently implement the reinforcement plan. Teachers

must also assure that all instructional personnel consistently implement the methods. In most cases, the strategies are used in combination with other methods, especially cognitive behavioral situations.

Parent training. Although the long term effectiveness of parent training programs is still unknown, the short term effectiveness of these programs have been quite positive. A study of 26 behavioral parent training (BPT) programs found that 80% of the children were better adjusted after their parents participated in program treatment (Serketich & Dumas, 1996). Behaviors not only improved at home, but also generalized to school interactions.

Teachers may have to consider the impact of asking families to participate in parent training programs. Sometimes work schedules, child care and stereotypical attitudes are barriers to getting parents to training. Also, parent training requires special trainers and materials. Often schools have limited or no access to these needed resources.

Summary

The literature has several options for teachers who have students with SED who exhibit problem classroom behaviors. Thoughtful teachers will examine their available resources, the needs of their students, their own time and skills, and their expected outcomes to decide upon the strategies they will use. Professionals will always thoroughly evaluate the literature of a chosen technique and receive appropriate instruction prior to use with their students. Finally, any newly implemented intervention should be evaluated to see if the student behavior truly improves.

References

Alberto, P.A., & Troutman, A.C. (1995). Applied behavior analysis for teachers. Englewood Cliffs, NJ: Simon & Schuster Company.

Alderman, G.L., & Nix, M.. (1997). Teachers' intervention preferences related to explanations for behavioral problems, severity of the problem and teacher experiences. Behavioral Disorders, 22(2), 87-95.

Bernstein, G.S., Ziarnik, J.P., Rudrud, E.H., & Czajkowski, L.A. (1981). Behavioral habilitation through proactive programming. Baltimore, MD: Paul H. Brookes Publishing Company.

Cassell, J. (1993). Decreasing physical and verbal aggression in fifth grade students through conflict resolution training. (ERIC Document Reproduction Service No. ED 370031)

Coats, K.I. (1993). The impact of reality therapy in a school for emotionally disturbed youth: A preliminary report. Unpublished doctoral dissertation. (ERIC document Reproduction Service No. ED355690).

Costenbader, V., & Reading-Brown, M. (1995). Isolation time out used with students with emotional disorders. Exceptional Children, 61(4), 353-363.

Dunlap, G., DePerczel, M., Clarke, S., Wilson, D., Wright, S., White, R., & Gomez, A. (1994). Choice making to promote adaptive behavior of students with emotional and behavioral challenges Journal of Applied Behavior Analysis, 27(3), 505-518.

Harding, J., Wacker,D.P., Cooper, L.J., Millard, T., & Jensen-Kovalan, P., (1994). Brief hierarchy assessment of potential

treatment components with children in an outpatient clinic. Journal of Applied Behavioral Analysis, 27(2), 291- 300.

Hudley, C.A., (1994). Attribution retraining and behavior change among highly aggressive and nonaggressive African-American boys. (ERIC Document Reproduction Service No. ED376950).

Hughes, J.N., Grossman, P.B., & Hart, M.T. (1993). Effectiveness of problem solving training and teacher consultation with aggressive children. Unpublished doctoral dissertation. (ERIC Document Reproduction Service No. ED 370056).

Infante. D.A., (1988). Arguing constructively. Prospect Heights,IL.: Waveland Press.

James, D.A. (1990). Behavioral modification project: Reducing and controlling calling out behaviors. ERIC Document Reproduction Service No. ED319171.

Kaufman, J.M. (1993). Characteristics of emotional and behavioral disorders of children and youth. New York: Macmillan Publishing Company.

Kendall, P. C., & Panichelli-Mindel, S.M. (1995). Cognitive-behavioral treatments. Journal of Abnormal Child Psychology, 23(1), 107-125

Kern, L., Wacker, D.P., Mace, F.C., Falk, G.D., Dunlap, G., & Kromery, J.D. (1995). Improving the peer interactions of students with emotional and behavioral disorders through self-evaluation procedures: A component analysis and group application. Journal of Applied Behavior Analysis, 28(1), 47-59.

Ludwig, C.L. (1994). Teachers' suggestions for noncompliant behaviors in the classroom. Unpublished masters thesis. Minot State University, ND.

Marandola, P., & Imber, S. (1979). Glasser's classroom meeting: A humanistic approach to behavior change with preadolescent inner-city learning disabled children. Journal of Learning Disabilities, 12(6), 383-387.

Polloway, E.A., & Patton, J.R. (1993). Strategies for teaching learners with special needs. New York, NY: Macmillan Publishing Company.

Popvich. D. (1981). Effective education and behavioral programming for severely and profoundly handicapped students: A manual for teachers and aides. Baltimore, MD: Paul H. Brookes Publishing Company.

Rancer, A.S., & Kosberg R.L. (1994). Violence prevention: A communication based curriculum. Unpublished doctoral dissertation. (ERIC Document Reproduction Service No. ED 381834)

Sanderson, W.C. (1997). From the literature: Cognitive behavior therapy. American Journal of Psychotherapy, 51, 289-291.

Serna, L.A., Schumaker,J.B., Sherman, J.A., & Sheldon, J.B. (1991). In-home generalization of social interactions in families of adolescents with behavioral problems. Journal of Applied Behavior Analysis, 24(4), 733-746.

Serketich, W.J., (1996). The effectiveness of behavioral parent training to modify antisocial behavior in children: A meta-analysis. Behavioral Therapy, 27, 171-186.

Stage, S.A. (1997). A preliminary investigation of the relationship between in-school suspension and the disruptive classroom behavior of students with behavioral disorders. Behavioral Disorders, 23(1), 57-76.

Waas, G., (1988). Social attribution biases of peer rejected and aggressive children. Child Development, 59, 969-975.

Walker, H.M. (1990) Classroom noncopliance and Teacher-student interactions. Prise Reporter, 21(4), 1.

Wood, F.H., & Wrobel, G. (1990). Consumer prespectives on time-out. (ERIC Document Reproduction Service No. ED.....).